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January 13, 2006

The Honorable Michael O. Leavitt  
Secretary of Health and Human Services  
U.S. Department of Health and Human Services  
200 Independence Avenue, S.W.  
Washington, D.C. 20201

Dear Secretary Leavitt:

I am writing to you on behalf of Missouri citizens who are eligible for the new federal prescription drug program, Medicare Part D which began January 1, 2006.

On January 1, 2006 Missourians who are eligible for both Medicare and Medicaid had their prescription coverage transferred from the state run Medicaid program to the federally run Medicare program. The portion of the transition that was the responsibility of the state of Missouri has been implemented without problems. Unfortunately, federal miscalculations have resulted in Missourians experiencing a multitude of problems with Medicare Part D. I have directed the Missouri Division of Medical Services to use all of its considerable resources in the state pharmacy program to assist recipients and pharmacy providers in finding solutions to federal program issues. Despite our efforts to compensate for the federal mistakes, Medicare Part D issues continue to cause considerable concern.

While we recognize that federal attempts to solve the problems have resulted in significant improvements, we remain gravely concerned about the health and welfare of our most vulnerable Missourians. Missouri anticipates that it will be several weeks before all of these issues are resolved and we can guarantee all of our citizens have reliable access to their medications through their Medicare Part D plan. The current situation resulting from federal missteps is unacceptable. I strongly urge that the federal government take immediate action to ensure that the health and safety of dual eligible Missourians is protected.

During the auto-enrollment process, the federal government failed to auto-enroll as many as 14,000 Missourians who are eligible for both Medicaid and Medicare. Missouri noted the problem and communicated with CMS in December and the state was told that corrective action would be taken to ensure that these individuals would be able to

fill their prescriptions on and after January 1. Based on our call center activity, corrective action was clearly not taken.

CMS communicated to Missouri that they had a contingency plan for those individuals who "fell through the cracks." Upon implementation, the contingency plan and the commitment to pay the claims was either not known or in some cases not acceptable to many pharmacy providers. This process has been problematic for many pharmacies trying to assist recipients who were not enrolled in a prescription drug plan, and it does not seem to address the window of exposure for these recipients.

Many prescription drugs plans did not have dual eligibles in the correct benefit design, resulting in improper deductibles, co pays, and coinsurance charges. Many of these low-income duals could not afford to pay the unwarranted charges in order to receive their medication. In many cases, recipients who contacted their prescription drug plan were told that updates would not occur until February 1, 2006 at the earliest.

Many dual eligibles changed plans in November and December (as allowed) because the plans in which they were auto-enrolled did not have formularies consistent with their medication needs. These changes were not updated and not reflected in the beginning databases, resulting in often confusing situations for both pharmacists and recipients who were unable to fill prescriptions.

Prescription drug plan help desks have been universally unavailable either because of understaffing or inadequate hours. Many pharmacies reported waiting as many as eight hours on hold to try and assist recipients with problems. Others reported hang-ups or messages instructing them to call back at a later time. Many recipients reported similar experiences and also reported receiving contradictory information in response to their inquiries.

Missouri can no longer stand by and watch the health and safety of our most vulnerable citizens continue to be jeopardized. Missouri offered to help the federal government with the implementation of Medicare Part D in our state numerous times but our offers of help were repeatedly turned down. The federal government must take immediate action to preclude harm to these citizens and prevent increased costs to the state to maintain their health status.

Sincerely,

A handwritten signature in black ink, appearing to read "Matt Blunt", with a stylized flourish at the end.

Matt Blunt

cc: Missouri Congressional Delegation  
Director Gary Sherman